

UNC SCHOOL OF SOCIAL WORK CLINICAL LECTURE SERIES  
 The Frank Daniels Endowed Lecture

Trauma Work and Marginalized Groups:  
 Ethical Practice with Gender  
 Non-Conforming Individuals

February 13, 2017

Tavi Hancock, LCSW  
 Durham, NC

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Also Inspired by the Work of Dr. Sand Chang



Seven horizontal lines for notes.

Things to Remember

- In discussing groups of people always assume that someone of that Identity is in the room with you
- Be mindful and aware of your own types of privilege and power
- We can talk about common themes without assuming universal truths

Seven horizontal lines for notes.

Experience Level

Please raise your hand if you ...

- have received training in working with transgender people.
- have received training on transgender issues by a transgender person.
- have worked with a transgender person.

Please turn to person next to you and brainstorm considerations and dilemmas that might arise.

Seven horizontal lines for notes.




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**Increased Awareness**

Neither Male Nor Female: Oregon Resident Legally Recognized As Third Gender

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**Reality: State of Emergency**

- ◊ **45%** of those with unsupportive families have experienced homelessness, 30% of all TGNC have.
- ◊ **54%** of those with unsupportive families have attempted suicide, 40% of all TGNC people have.
- ◊ **77%** of TGNC K-12 students have been harassed, including 24% of whom have been assaulted at school, 17% have dropped out of school due to harassment (school pushout).
- ◊ **26** Trans people murdered in the US in 2016, **2** within the first week of 2017. Almost all were POC.
- ◊ **54%** have experienced Intimate Partner Violence.

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### State of Emergency Continued

- **3x** higher unemployment rate than general pop
- **29%** living in poverty, 2x rate of general pop.
- **68%** do not have ID documents reflecting preferred name and gender, or do not have documents that match. Cost is cited as main barrier to this.
- **1/3** of TGNC with ID that seems inconsistent with appearance have been harassed, made to leave an establishment, or assaulted.
- Over **55%** of those seeking insurance coverage for gender related surgery were denied.

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### Reality Continued

- ❖ **1/3** who saw a healthcare provider in the past year reported a negative experience related to gender identity by the provider or medical employees.
- ❖ TGNC people are living with HIV at **5x** the rate of the general population.
- ❖ Over **30%** who were employed in the past year report being fired, denied promotion, or harassed and mistreated due to gender expression or identity.
- ❖ **77%** took steps to hide their gender identity at work to avoid mistreatment.

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### Ongoing, Complex Traumatic Experiences

- **70%** of those who stayed in a shelter in past year reported being harassed, sexually or physically assaulted, or kicked out due to being transgender
- TGNC people are **4x** less likely to own a home than the general US population.
- **1 in 5** TGNC have participated in underground economy (criminalized activity) for income.
- Of those arrested in past year, **58%** experienced mistreatment such as being misgendered repeatedly, physical or sexual assault, and being coerced into sexual activity to avoid jail.

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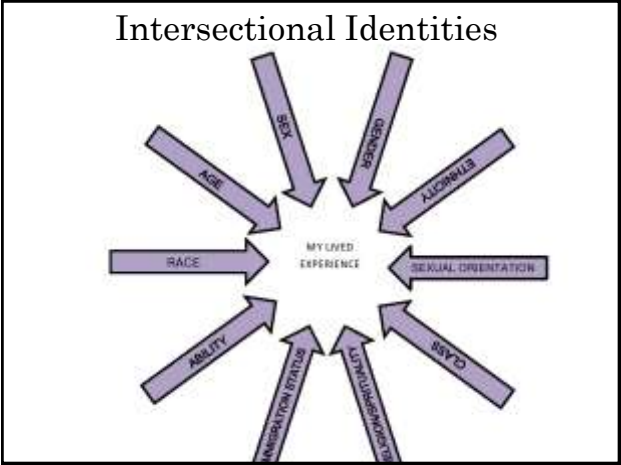
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Cisgender: One who identifies with the sex assigned at birth  
 Cisgender Privilege: Unearned benefits based on alignment of assigned sex and felt gender

**CHECK YOUR PRIVILEGE:**

- WHITE
- MALE
- CLASS
- CHRISTIAN
- CISGENDER\*
- ABLE-BODIED
- HETEROSEXUAL

\*cisgender: a descriptor for a person whose gender identity, gender expression and biological sex all align

privilege: unearned access to social power based on membership in a

If you can use public bathrooms

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### Terminology

Transgender is not a noun or verb.  
 Correct: “Transgender people” “She’s a transgender woman”.  
 Incorrect: “The transgenders,” “He’s going to trans,” “They’re transgendered,” “Those People.”  
 Some gender non-conforming people identify as trans and others do not. Some might identify as non-binary and trans or genderqueer and not trans.  
 Don’t assume someone’s identity based on appearance. Ask how someone identifies.  
 Normalize asking about pronouns, even if you think you’re among cis people.

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### Some Pronoun Possibilities

	Subject	Object	Pronoun	Pronunciation
Gender Binary	she	her	hers	as it looks
	he	him	his	as it looks
Gender Neutral	they*	them*	their*	as it looks
	ze	hir	hirs	zhee, here, heres
	ze	zir	zirs	zhee, zhere, zheres
	xe	xem	xyr	zhee, zhem, zhere

\*used as singular

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### Common Misconceptions

- ◆When someone transitions, they are now “straight.” (Nope, trans people can be any sexual orientation.)
- ◆All trans people know when they are young children that they are “in the wrong body.” (Nope, people recognize and understand their gender identity at a range of ages and in a variety of ways.)
- ◆Transgender people want surgery to become the “opposite” sex. (Nope, some binary trans people do not desire any surgeries, while some non-binary people do. The types of surgeries someone might want vary and many or most people don't have financial access.)

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### Self Determination




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### Ethical Standard 1.02

Social workers respect and promote the right of clients to **self-determination** and assist clients in their efforts to identify and clarify their goals.

Social workers may limit clients' right to self-determination when, in the social workers' professional judgment, clients' actions or potential actions pose a serious, foreseeable, and imminent risk to themselves or others.

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### Implicit Bias

Implicit bias refers to the attitudes or stereotypes that affect our understanding, actions, and decisions in an unconscious manner.

These biases, which encompass both favorable and unfavorable assessments, are activated involuntarily and without an individual's awareness or intentional control.

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### Let's Not Forget: Trans and Gender Non-Conforming People are Resilient and Powerful



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### Trauma and TGNC Communities

◆28% avoid medical settings due to fear of discrimination.

Historically psychiatry, mental health, and social work fields have discriminated against or mistreated trans folx.

◆50% report having to educate their medical or mental health provider.

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### Types of Trauma

- Physical
- Sexual
- Emotional
- Preverbal/epigenetic
- Intergenerational / ancestral
- Grief / loss
- Religious
- Intimate
- Partner / domestic
- Systematic and institutional violence / discrimination
- Vicarious community trauma

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### Trauma and the Brain

**L** Analytical  
Calms the emotional side  
in trauma it has less ability to do it's job  
Trauma freezes thinking

**R** Alarm Portion  
Trauma hypersensitizes it  
It overreacts - like the alarm system of a car that keeps going off

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### Trauma and the Body

#### Anatomy of a Trauma

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    graph TD
      A[Physical Injury or Emotional Insult] --> B[Body Trauma]
      A --> C[Emotional Storage]
      B --> D[Manifested Pain]
      C --> D
      D --> E[Inflammation]
      E --> F[Tissue Shortening]
      F --> G[Restricted Movement]
      G --> H[Impaired Function]
      H --> I[Circulatory Congestion]
      I --> J[Pain and Emotional Validation]
      J --> K[Fixed Belief(s)]
      K --> G
      K --> H
  
```

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**MicroAggressions**

Subtle Forms of Discrimination

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**Abuse, Sexual Assault, Intimate Partner Violence**

50% of all Trans folx have experienced sexual abuse or assault in their lifetimes.

Many domestic violence or sexual violence survivor programs are not inclusive of or informed regarding transgender people

Resource: FORGE (online webinars, publications and resources for download for clinicians as well as some for use with clients)

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### Institutionalized Discrimination/Oppression

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### Trump/Pence Campaign/Election

**DEAR INDIANA GOV. MIKE PENCE,**

Trans people and immigrants deserve **EQUAL RIGHTS** and **RESPECT**.

Everyone should be able to get a legal name change regardless of citizenship status.

**Change the LAW!**

**Transgender Law Center**

**Mike Pence Wanted to Use HIV/AIDS Money to Fund Conversion Therapy**



Mike Pence, Indiana Governor and Donald Trump's running mate, said in 2008 that he was in favor of sending money allocated to care for people with HIV/AIDS to organizations that provide conversion therapy.

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### Findings of the Study

- Prevalence of mood disorders increased over **30%** among LGBTQ+ respondents in states with anti-LGBTQ+ campaigns and legislation
- Prevalence of generalized anxiety disorder in the same respondents increased **248%**
- Prevalence of alcohol use disorders increased 42% in the LGBTQ+ respondents in states with anti-LGBTQ+ campaigns and legislation
- In comparison, straight, cis respondents in the same states did not show increase in mood disorders. They did show increase in anxiety disorder (27%) and alcohol use (18%).

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### Mental Health Outcomes / Trauma Indicators

- Major Depression (hopelessness, helplessness)
- Dissociation
- Generalized Anxiety
- Early initiation of substance abuse (2011 study: 25% report abusing substances specifically to cope with discrimination regarding gender)
- Shame, Internalized Transphobia
- Suicidal Ideation
- Self Injury
- Anger
- Physical Pain Symptoms
- Social Isolation/Withdrawal

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### Protective Factors/Improved Outcomes

- Social Policy Change to Enhance Protections
- Study in 2010 on effects of discrimination showed that marginalized people who **Did Not Accept** the discrimination as valid and normal and then **Disclosed and Discussed** their experience with others with shared identity had lower rates of psychiatric disorders.

This suggests that validating clients' experiences of discrimination and oppression and assisting with connection to supportive spaces of those with shared identities could lead to improved outcomes.

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### 6.04 Social and Political Action




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**Ethical Pitfalls in Clinical Practice**

- ◆Assuming that one identity explains everything
- ◆Asking inappropriate questions
- ◆Not examining our own biases and ways our varying privileges might affect how we're viewing the client or our approach
- ◆Conducting modalities such as: Somatic Experiencing, Yoga, EMDR, Mindfulness without checking in each time about a client's comfort level with being "in the body" or "bringing awareness" to the body. Not being aware of gendered language in "scripts" used in different treatments.

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**Ethical Pitfalls Continued**

- ◆Not practicing new pronouns or names outside of session and then getting them wrong or avoiding it altogether when we see clients. Not checking in with clients, especially minors about how they want to be referred to with others (family members, teachers, school counselors, etc.)
- ◆Quote from therapist: "I realized that informed consent really is a paradigm shift from the ways I was trained to practice therapy."
- ◆4.01 Competence  
Not keeping up with new research, reading, training, or seeking consultation when needed.  
Not having any personal relationships with trans people outside of the office setting.

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**Types of Trauma Treatment**

- ◆EMDR (Eye Movement Desensitization and Re-processing) Enhancement by Dr. Sand Chang: "Phase Zero= Therapist Humility"  
"Phase Two= Future Empowered Transitioned or Authentic Self"
- ◆Somatic Experiencing
- ◆DBT (seek Skills Training Groups for gender non-conforming and transgender folk if your client wishes and inquire about trans-affirming environment of any group you are referring to)

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Video of session  
with 12 year old trans client

EMDR & Positive Cognition

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Tavi's Resources

- Monthly consultation group for clinicians seeking to improve skills with trans and gender non-conforming clients. Spring/summer session beginning soon. Email [tavi.castle.hancock@gmail.com](mailto:tavi.castle.hancock@gmail.com) for information.
- Individual consultation, call or email.
- DBT Skills Group for Trans and GNC ages 15 and up. Call 919-275-2216.
- QORDS summer camp, for queer and trans youth and youth of LGBTQ+ families ages 12-17, [www.qords.org](http://www.qords.org)

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Other Resources

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